

Health Care Reform Myths

EXPOSING A DECEPTIVE CAMPAIGN OF FEAR AND MISINFORMATION

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Health insurance reform opponents continue to spread myths about [America's Affordable Health Choices Act](#),

including the myth that reform will cost small businesses too much. However, research shows that small businesses will benefit significantly from health insurance reform in a number of ways including lower health care costs and saved jobs.

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MYTH: □ *“Health insurance reform will cost small businesses too much.”*

FACT: Under the emerging reform proposal, 87 percent of small businesses are likely to be exempt from the requirement to insure their workers. But for those that aren't, they are likely to get a better financial deal under health reform than without. A recent study by the Small Business Majority found that without health insurance reform, small businesses would pay nearly \$2.4 trillion over the next 10 years in health care costs for their workers. With reform, the study shows that small businesses can save as much as \$855 billion, a reduction of 36 percent, money that can be reinvested to grow the economy.

[The report from the Small Business Majority](#) highlights that the current health care system is simply UNSUSTAINABLE for small businesses. Among its many findings are the following:

COSTS

- WITHOUT health reform, small businesses will pay nearly \$2.4 trillion over the next 10 years in health care costs for their workers.

JOBS

- WITHOUT reform, the study shows that 178,000 small business jobs will be lost in 2018 as a result of rising health care costs.

WAGES

- WITHOUT reform, the study shows that \$834 billion in small business wages will be lost due to high health care costs over the next ten years

PROFITS

- WITHOUT reform, over the next 10 years, the study shows that small businesses will lose \$52.1 billion in profits to high health care costs.

In testimony before the House Democratic Steering & Policy Committee last week, John Arensmeyer, CEO of Small Business Majority, highlighted the urgent need for health insurance reform:

“Behind the statistics, though, there are millions of [small business owners] struggling with medical bills and keeping their businesses afloat. □ We hear stories every day from small business owners who can’t get coverage because they’ve been sick in the past or the health plans they are offered are outrageously priced . □ Louise Hardaway, a would-be entrepreneur in the pharmaceutical products industry in Nashville, had to give up on starting her own business after just a few months because she couldn’t get decent coverage—one company quoted her a \$13,000 monthly premium for herself and one employee.”

[
[9/15/09](#)
]

[Click here for a more detailed analysis of the House bill and small businesses](#)

MYTH: "The House health insurance reform bill will not benefit young people – instead imposing unaffordable mandates upon them."

FACT: The House bill provides young adults with access to quality, affordable health insurance they may not have now—including one-stop shopping online to find the best individual plan if their employer doesn't cover them. The fact is that young adults are the most likely to be uninsured – making them hit hardest by the health care crisis. [[FIND MORE FACTS HERE](#)]

MYTH: "Health insurance reform will ration care, harming people with disabilities."

FACT: In fact, the House bill protects people with disabilities from discrimination and unfair business practices that have resulted in loss of coverage and denial of care. This critical legislation will help ensure that all Americans – including those with disabilities – have access to affordable, high quality health coverage ... and that insurance company bureaucrats are no longer rationing care based on health, age, or ability to pay—instead putting doctors and patients back in charge of health care decisions.

Forty-three organizations representing individuals with disabilities, chronic conditions and their families signed a letter in support of America's Affordable Health Choices Act citing a number of provisions included in the bill that will benefit people with disabilities and chronic conditions. [[FIND MORE FACTS HERE](#)]

MYTH: “Doctors oppose a public health insurance option.”

FACT: According to a new survey by the Robert Wood Johnson Foundation published in the New England Journal of Medicine, 63 percent of physicians support a health reform proposal that includes both a public option and traditional private insurance. If the additional 10 percent of doctors who support a public-only option are included, then 73 percent of doctors across the country support inclusion of a public option. Only 27 percent of those surveyed support private-only options. [[FIND MORE FACTS HERE](#)]

MYTH: "Health insurance reform could be unconstitutional...or violate the 10th amendment."

FACT: As with creating Medicare and Medicaid, the federal government has the Constitutional power to reform our health care system. The 10th amendment to the U.S. Constitution states that the powers not delegated to the federal government by the Constitution, nor prohibited by it to the states, are reserved to the states ... or to the people. But the Constitution gives Congress broad power to regulate activities that have an effect on interstate commerce. Congress has used this authority to regulate many aspects of American life, from labor relations to education to health care to agricultural production. Since virtually every aspect of the health care system has an effect on interstate commerce, the authority of Congress to regulate health care is essentially unlimited. [[FIND MORE FACTS HERE](#)]

MYTH: “The House health insurance reform bill will not benefit young people – instead imposing unaffordable mandates upon them.”

FACT: The House bill provides young adults with access to quality, affordable health insurance they may not have now—including one-stop shopping online to find the best individual plan if their employer doesn’t cover them. The fact is that young adults are hit hardest by the health

care crisis.

RIGHT NOW:

- Young people are the most likely to be uninsured, with 46.8 percent of those age 18 to 34 having gone without health insurance at some point from 2007-2008.
- Young people are less likely to be offered coverage through their jobs (53 percent of those age 19 to 29, compared to 74 percent of those age 30 to 64).
- Young people are less likely to be able to afford coverage and care, with two-thirds of uninsured adults age 19 to 29 reporting that they went without necessary care because of costs.

America's Affordable Health Choices Act will help fix the problems young adults face in purchasing health coverage today. The bill:

- Gives affordable options for people who don't get coverage through their employer. The bill reforms the insurance market so that young people can't be denied coverage because of a pre-existing condition, caps out-of-pocket costs, and creates a new marketplace that will allow individuals to comparison shop for the best coverage.
- Invests in prevention and wellness. The bill will make preventive care free to everyone with insurance. This will help young people catch potential health problems early, and promote a lifelong wellness approach that will help avoid illnesses later in life.
- Brings health care costs down across the board – ensuring affordability. With the marketplace reforms that protect and empower consumers, as well as increased competition with the choice of a public health insurance option, premiums will be lower. The bill also includes affordability credits that will help young adults who are at the beginning of their career, and earning less income.

- Gives people stability and security. The bill provides peace of mind by offering the guarantee of quality, affordable coverage, to workers who switch jobs, start their own businesses, or seek more education (as younger people are more likely to do.)

Myth: *"Rep. Tom Price, R-Ga., said the Democrats' option would force individuals from their private plans to a government-run plan, a claim that the nonpartisan Congressional Budget Office supports."* - Associated Press [8/16/09]

"How can the Administration make the promise that if you like your insurance plan you can keep it, when CBO and other analysts estimate that some people will be switched from private to public?" - ABC's Jake Tapper on *This Week with Stephanopoulos* [8/16/09]

"...a study by the nonpartisan Congressional Budget Office which found that by 2016, 9 million people will no longer have their employer-based plan under health care reform because businesses would decide in many cases that it's cheaper simply to pay the penalty and push people into a public plan." – Fox News's Chris Wallace [8/16/09]

"Does he [the President] undermine his credibility when he makes some claims like, if you like your insurance you can keep your insurance, when a lot of people have said not really; employers could drop people from insurance if they wanted to move people into a public plan, if that existed?" – NBC's David Gregory on *Meet the Press* [8/16/09]

Fact: The CBO does not support the assertion that individuals could be forced into the public option. Under the bill, no one can ever be forced onto the public plan. The only way someone would be in the public plan is the person's own individual choice. All those using the Health Insurance Exchange will have a range of options – various private plans, and the public plan. If the employer is providing their employees health

insurance through the Exchange, it is the employee – not the employer – choosing the plan. CBO estimates that about 30 million people will be using the exchange by 2019 and that about one-third of them – or 11 to 12 million people – would choose the public option.

In fact, the Congressional Budget Office directly contradicts Rep. Tom Price's assertion -- specifically stating that Americans can choose the plan they'd like through the exchange:

· "Under the proposal, small employers could allow their workers to choose among the plans available in the exchanges—including the public plan ... Approximately 6 million people would obtain coverage in that way, with roughly a third choosing the public plan, so total enrollment in the public plan would equal about 11 million or 12 million, counting both individually purchased policies and employer-sponsored enrollees." [\[CBO letter to Chairman Rangel, 7/14/09, p. 6\]](#)

Republicans have falsely claimed that a public health insurance option would undermine employer-sponsored insurance. However, the CBO numbers state that, under America's Affordable Health Choices Act, MORE people would receive coverage through their employer than under current law :

· CBO estimate for Americans with employer-sponsored health insurance in 2019:

o Under current law: 162 million

o Under America's Affordable Health Choices Act: 164 million [\[CBO letter to Chairman Rangel, 7/17/09, p. 6\]](#)

Palin's statement on "Death Panel" = "Science Fiction" - Gets a "Pants on Fire." "We've looked at the inflammatory claims that the health care bill encourages euthanasia. It doesn't. There's certainly no "death board" that determines the worthiness of individuals to receive care... She said that the Democratic plan will ration care and "my parents or my baby with Down Syndrome will have to stand in front of Obama's 'death panel' so his bureaucrats can decide, based on a subjective judgment of their 'level of productivity in society,' whether they are worthy of health care." Palin's statement sounds more like a science fiction movie (Soylent Green, anyone?) than part of an actual bill before Congress. We rate her statement Pants on Fire!" [

[Sarah Palin falsely claims Barack Obama runs a 'death panel'](#)
, Politifact, August 11, 2009]

AP Factcheck: "No 'death panel' in health care bill." "Former Republican vice presidential candidate Sarah Palin says the health care overhaul bill would set up a "death panel." Federal bureaucrats would play God, ruling on whether ailing seniors are worth enough to society to deserve life-sustaining medical care. Palin and other critics are wrong. Nothing in the legislation would carry out such a bleak vision. The provision that has caused the uproar would instead authorize Medicare to pay doctors for counseling patients about end-of-life care, if the patient wishes. " [

[AP Fact Check: No 'Death Panel' in health care bill](#)
, Associated Press, August 11, 2009]

Boehner's statement on abortion "false," "Nothing" supports claim. House Republican leader John Boehner is making a habit of passing along misinformation on health reform. This time in an editorial in the National Review, he claimed the House Democratic reform plan 'will require (Americans) to subsidize abortion with their hard-earned tax dollars.' This claim is that it is wrong. According to Politifact, "a key version of the bill — the one passed by the House Energy and Commerce Committee — members went to great pains to include an amendment to

ensure that federal money is not used for abortion coverage....We don't see anything to support Boehner's claim that taxpayers would subsidize abortions. And so we rule his statement False."

[[Boehner says](#)

[Democrats' health care plan would subsidize abortions](#)

, Politifact, August 7, 2009]

Conservatives for Patients Rights “Administers bad facts, again.” “We’ve written about two previous misleading ads from the group Conservatives for Patients’ Rights, whose TV spots argue against health care overhaul efforts that are moving through Congress. This ad puts forth a new claim, saying that “new rules could hike your health insurance premiums 95 percent.” That’s a startling statement. But it’s contradicted by other experts that find premiums would actually go down under the leading proposals in Congress.” [

[CPR Administers Bad Facts, Again](#)

, FactCheck.org, August 3, 2009]

Family Research Council attacks provisions that “none” of the health care measures have. “An anti-abortion group’s TV ad shows a white-haired man fretting that under a federal health plan, ‘They won’t pay for my surgery, but we’re forced to pay for abortions.’ ‘Will this be our future?’ the ad asks, merging the fears of seniors worried about their health care with those of anti-abortion advocates. ‘Our greatest generation, denied care. Our future generation, denied life.’ In fact, none of the health care overhaul measures that have made it through the committee level in Congress say that abortion will be covered, and one of them explicitly says that no public funds will be used to finance the procedure. Furthermore, none of the bills call explicitly for cuts in Medicare coverage, much less rationing, under a public plan.” [

[Surgery for Seniors vs. Abortions](#)

, FactCheck.org, August 3, 2009]

Conservative group Liberty Council gets a "pants on fire" for wild claim on abortion. The Liberty Counsel alleges that Page 992 of the bill "will establish school-based 'health' clinics. Your children will be indoctrinated and your grandchildren may be aborted!" According to Politifact, "the bills now before the House say nothing about the school clinics being able to offer abortions. Perplexed, we called the Liberty Counsel...We spoke with Sarah Speller at the Liberty Counsel, who told us that the group had been getting a lot of calls about the memo and that everyone there was very busy as a result. However, she assured us that 'as far as our office can tell, everything in the overview is accurate. That's about all I can tell you,' she said. 'I'm just relaying what I've been told to say.' We see no language in the three main versions of the bill that would allow school-based clinics, which have a long history of providing basic health services to underprivileged students, to provide abortions. Nor would the clinics even be new — they have been around for three decades. So we rate the claim Pants on Fire!

[School health clinics would not provide abortions](#) , Politifact, August 7, 2009]

Club for Growth attack on Health Reform plan, "false" and "misleading." The conservative "Club for Growth is using the August recess to try to stop the congressional effort to create a government-run health insurance option....In the ad, a man weeps over someone lying in a hospital bed while the announcer says, '\$22,750. In England, government health officials decided that's how much six months of life is worth. Under their socialized system if a medical treatment costs more, you're out of luck. That's wrong for America.... We believe it's quite a stretch for the Club for Growth to suggest it would be part of the health reform plan. Dr. Sean Tunis, a former top official at the Centers for Medicare and Medicaid under the Bush administration and current director of the Center for Medical Technology Policy, says the ad is misleading. 'We have a public plan now, and that's Medicare,' Tunis said. 'And Medicare doesn't put a price on life... That seems like a fallacious connection to me...'The House and Senate bills under consideration would not require the government to decide how much a person's life is worth. As a result, we give the Club for Growth a False." [

[Club for Growth's health care ad campaign misleading](#)

, Politifact, August 6, 2009]

Boehner Peddles “Baseless” end of life myth. Claim that House Dem bill pushes suicide is “nonsense.” House Republican Leader John Boehner continues to get his facts all wrong on the House Democratic health reform bill. This time, the non-partisan FactCheck.org labeled his claim that the House bill encourages euthanasia, “baseless.” According to FactCheck.org: “Our inboxes have exploded recently with worried queries from readers who have heard that the House’s proposed health care bill, H.R. 3200, contains a provision that would require that ailing seniors be pressed to consider suicide in order to save the taxpayers money on Medicare. Most messages mention that this clause appears on page 425 of the legislation.... The claim that the bill would “push suicide” is a falsehood.... At least two Republican leaders have echoed this end-of-life distortion. On July 23, Republican Rep. John Boehner of Ohio, the House minority leader, released a statement, along with Republican Policy Committee Chairman Thaddeus McCotter of Michigan, saying that the bill would encourage euthanasia.” [[False](#)

[Euthanasia Claims](#)

, FactCheck.org, July 29, 2009]

Use of “deceptive assaults” to stop health insurance reform. “Republicans in Washington seem to be shifting into overdrive to keep a health system overhaul from passing Congress before the August recess. Yesterday, July 22, brought two more deceptive assaults (that we know of) on the pending bills, one from Minority Whip Eric Cantor and the other from the top GOP member of the House Immigration Subcommittee, Steve King of Iowa.” [

[Misleading GOP Health Care Claims](#)

, FactCheck.Org, July 23, 2009]

Cantor's video "inflates" cost of bill by "more than 50%." "Cantor's is in the form of a video that accuses Obama and the Democrats of being in a "reckless rush" to finalize a reset of the system. "How much will it cost?" the narrator asks, as photos of House Democrats flash onscreen. "\$1.6 trillion?" Actually, in a preliminary analysis released July 14 (and updated July 17), the Congressional Budget Office scored the House tri-committee group bill as costing a net \$1.042 trillion. Cantor's video inflates that number by more than 50 percent." [

[Misleading GOP Health Care Claims](#)

, FactCheck.Org, July 23, 2009]

Cantor's ad fails to mention there "is no Republican plan." "In the sunny wrap-up to the ad, the narrator describes "the Republican plan": "If you like what you have, you can keep it," he says. "Access to an affordable basic coverage." But there is no plan around which Republicans have coalesced. Back in May, some GOP lawmakers offered a bill that would have cut the tax deduction that employers get for offering their employees health insurance plans, and given workers tax credits instead. But there's been little talk of the bill since then. And Missouri Republican Rep. Roy Blunt was tapped to head a GOP health care task force in February, which was charged "with crafting Republican solutions to increase Americans' access to quality, affordable health care," but which so far has produced no plan and seems unlikely to do so." [

[Misleading GOP Health Care Claims](#)

, FactCheck.Org, July 23, 2009]

Employer Mandate Is Not A "Jobs Tax." Wonk Room: "If the Energy and Commerce compromise comes to pass,

[of businesses](#)

would be exempt from the mandate, since they have a payroll of

[less than \\$500,000](#)

[87 percent](#)

. Even before the compromise,

[77 percent of businesses](#)

would have been unaffected by the mandate. The only small employers that will be affected by the full scope of the mandate are firms with few employees who are making a lot of money — law firms, for instance. And chances are, businesses of that sort already provide insurance. "

<http://wonkroom.thinkprogress.org/2009/07/30/wsj-job-tax/>

Reform Won't Ration Care. The most common argument for why health reform will ration care focuses on Comparative Effectiveness Research (CER). According to the

[Wonk Room](#)

, conservatives "argue that the Center for Medicare and Medicaid Services (CMS) could use the information to make coverage decisions for Medicare. And three, if the government uses the comparative research results to establish best practice guidelines, then doctors who don't follow the guidelines but rather consider the individual needs of their patients, could be liable for malpractice claims.... the last two arguments fall apart on close scrutiny. The government isn't mandating that doctors adopt the results of CER and it is not rationing care. Each patient has his or her unique needs and the ultimate decision for how to proceed should be left to the doctor and the patient. Currently, approximately one-third of all treatments have never been proven to produce better outcomes; CER would provide doctors with unbiased information about the most effective treatments, help doctors and patients make better informed decisions, and improve the quality of care."

<http://wonkroom.thinkprogress.org/2009/06/19/republicans-offer-redundant-cer-amendments/>

Republicans Opposed Medicare In 1960s By Warning Of Rationing, "Socialized Medicine." Ronald Reagan: "[I]f you don't [stop Medicare] and I don't do it, one of these days you and I are going to spend our sunset yearstelling our children and our children's children what it once was like in America when men were free." [[1961](#)] Barry Goldwater:

“Having given our pensioners their medical care in kind, why not food baskets, why not public housing accommodations, why not vacation resorts, why not a ration of cigarettes for those who smoke and of beer for those who drink.” [1964] Bob Dole: In 1996, while running for the Presidency, Dole openly bragged that he was one of 12 House members who voted against creating Medicare in 1965. “I was there, fighting the fight, voting against Medicare . . . because we knew it wouldn’t work in 1965.” [

[1965](#)

]

<http://thinkprogress.org/2009/07/29/medicare-flashback/>

Republican claim about coverage for illegal immigrants, “not true.” “King claimed that this is what the Congressional Budget Office’s recent analysis of House health care legislation said. But it didn’t. His press release also said that the 5.6 million would be covered “in large part because the liberal proposal does not include any requirements to verify the citizenship or immigration status of those receiving taxpayer-funded health benefits.” That’s not true, either.”

[

[Misleading GOP Health Care Claims](#)

, FactCheck.Org, July 23, 2009]

Canadian style health care? A “straw man argument,” based on opinion piece “riddled with errors.” “One ad claims that ‘ Washington wants to bring Canadian-style health care to the U.S.’ But the health care bills moving through Congress don’t call for a single-payer system like Canada’s... Obama, too, has said repeatedly that he doesn’t back a conversion to a single-payer system But as we’ve said about other ads, all this sets up a straw man argument, criticizing Canada’s health care system despite the fact that a purely government-run system isn’t what’s being seriously considered in Congress or being proposed by the president.” [

[Canadian Straw Man](#) , Fact Check.org,

June 17, 2009]

Insurance industry “cherry-picks facts” in fight against public option. “Karen Ignagni, president of America’s Health Insurance Plans (AHIP), invoked the statistic to argue against the creation of a government-run insurance option. But the polls are not that simple, and her assertion reveals how the industry’s effort to defend its turf has led it to cherry-pick the facts. The poll Ignagni was citing actually undercuts her position: By 72 to 20 percent, Americans favor the creation of a public plan, the June survey by the New York Times and CBS News found. People also said that they thought government would do a better job than private insurers of holding down health-care costs and providing coverage.” [[Health Insurance Industry Spins Data in Fight Against Public Plan](#), Washington Post, July 22, 2009]

Gingrich claims on cost and taxes of health care plan simply “not the case”. “As for Gingrich’s twittered claim that the legislation would increase taxes on “virtually everyone,” that’s not the case. The proposal would increase taxes on those with adjusted gross incomes above \$280,000 a year or \$350,000 a year for couples. That’s not a whole lot of people. The nonpartisan Tax Policy Center [projected](#) a little less than 2.2 million households (1.4 percent of all households) would face higher taxes under the proposal. The surtax for those upper-income folks would start at 1 percent and go up to 5.4 percent with top incomes over \$1 million. (This [New York Times](#) [post](#) explains how the surtax would work.)” [[Tax-and-Spend Twittering](#), FactCheck.org, July 15, 2009]

Republicans use “misleading” facts when analyzing health Care. “A new ad from Conservatives for Patients’ Rights says that a public health insurance plan now being proposed in Congress “could crush all your other choices, driving them out of existence, resulting in 119 million off their current insurance coverage.” That’s misleading. The 119 million figure comes from an analysis of a plan that would mirror Medicare and be open to every individual and business that wanted it. But that’s not the type of public plan President Obama has proposed. Nor is such a plan gaining acceptance on Capitol Hill.” [

[More Health Care Scare](#)

, FactCheck.org, June 11, 2009]

Investor’s Business Daily is “perpetuating misinformation” on health care legislation, “page 16 doesn’t allow private insurance.” “Jennifer Tolbert, the (Kaiser Family Foundation) foundation’s principal policy analyst, told us that Page 16 doesn’t outlaw private insurance. “There will be individual policies available, but people will buy those policies through the national health insurance exchange,” she said. The House bill allows for existing policies to be grandfathered in, so that people who currently have individual health insurance policies will not lose coverage. The line the editorial refers to is a clause that says the health insurance companies cannot enroll new people into the old plans.” [

[The Truth-O-Meter Says: Private health insurance not banned on page 16 of the House bill](#)

, Politifact, July 22, 2009]

Rove “wrong”, “false,” “distorting” facts. “He (Rove) said, “The Lewin Group estimates 70 percent of people with private insurance — 120 million Americans — will quickly lose what they now get from private companies and be forced onto the government-run rolls as businesses

decide it is more cost-effective for them to drop coverage.” That’s wrong. The report said that people would choose to leave private insurance if given a cheaper option, but the report provided smaller numbers for other options. The debate in Congress over what a public option will look like is fierce and ongoing. So Rove is picking the worst-case scenario and then distorting the cause and effects. We rate Rove’s statement False.” [

[The Truth-O-Meter Says: Rove’s op-ed distorts health study](#)
, Politifact, June 12, 2009]

120 million deprived of health care is “not correct,” Pence’s statement “false.” “But there’s a hitch: We’ll grant that Congress could come up with a Medicare-style plan and open it to everyone, but it doesn’t seem likely. Pence appears to be picking the worst number he can choose. And he doesn’t mention the fact that under the scenario laid out by the Lewin Group, people would still have health care coverage and their premiums reduced by 30 to 40 percent. He says the government would “deprive” people of health insurance, when actually the scenario is that they would choose a different option. Finally, we have to include a caveat about the Lewin Group. The group says it operates with editorial independence, but it is a subsidiary of UnitedHealth Group, which also offers private health insurance.” [

[120 million “deprived” of health care is not correct](#)
, Politifact, May 19, 2009]

End of life claim, “pants on fire” “outright distortion,” Republicans “spreading a ridiculous falsehood.” “Republicans have found many reasons to oppose the Democrats’ health care proposal, but this is one of the oddest. McCaughey incorrectly states that the bill would require Medicare patients to have these counseling sessions and she is suggesting that the government is somehow trying to interfere with a very personal decision. And her claim that the sessions would “tell [seniors] how to end their life sooner” is an outright distortion. Rather, the sessions are an option for elderly patients who want to learn more about living wills, health care proxies and other forms of end-of-life planning. McCaughey isn’t just wrong, she’s spreading a ridiculous falsehood.” [

[McCaughey claims end-of-life counseling will be required for Medicare patients](#)

, PolitiFact, July 16, 2009]

Lewin Group, frequently cited by GOP, “wholly owned” by “one of the nation’s largest insurers.” “ Generally left unsaid amid all the citations is that the Lewin Group is wholly owned by UnitedHealth Group, one of the nation's largest insurers. More specifically, the Lewin Group is part of Ingenix, a UnitedHealth subsidiary that was accused by the New York attorney general and the American Medical Association, a physician's group, of helping insurers shift medical expenses to consumers by distributing skewed data. Ingenix supplied its parent company and other insurers with data that allegedly understated the “usual and customary” doctor fees that insurers use to determine how much they will reimburse consumers for out-of-network care.” [[Research Firm Cited by GOP Is Owned by Health Insurer](#) , Washington Post, July 22, 2009]

Republicans “break previous promise” to provide health care bill. “GOP Rep. [Roy Blunt](#) has now said Republicans won’t offer a health care bill of their own, breaking a previous promise. Worse, it turns out Blunt is chair of something called the “House GOP Health Care Solutions Group.” Blunt’s quote

[went up online](#)

late yesterday evening: “Our bill is never going to get to the floor, so why confuse the focus? We clearly have principles; we could have language, but why start diverting attention from this really bad piece of work they’ve got to whatever we’re offering right now?” That’s a pretty stark admission that Republicans won’t introduce their own bill solely because they think it’s better politics to keep the focus on the Democrats. It gets better. Head over to the House GOP Health Care Solutions Group’s

[Web site](#)

, and you’ll find prominent video of Blunt vowing the GOP is “drafting our own legislation.”” [[Leader Of GOP Health Care “Solutions Group” Says GOP Won’t Offer Health Care Bill](#) , Washington Post’s Plum Line, July 23, 2009]

Americans support need to “pay for the cost of health care reform.” “A proposal has been made to raise taxes on those who earn more than \$250,000 a year to pay for the cost of health care reform. Do you favor or oppose raising taxes on those who earn more than \$250,000 a year to pay for the cost of health care reform? 48% Favor; 44% Oppose; 8% Not sure.

Another [recent poll](#) found that 60% support taxing the wealthy for reform. So if, as Nelson says, “tax” is a four letter word, the public doesn’t appear to think of it as an epithet when it’s applied to the wealthy in service of health care reform. What’s hard to understand is this reflexive belief that majorities must think the way conservatives do.” [

[Despite Centrist Claim, People Support Taxing Rich On Health Care](#)
, Washington Post’s Plum Line, July 17, 2009]

[Center for American Progress - 120 Myths and Facts in H.R.3200](#)

For more Fact Checking, [click here](#) .

Full text of the bill, fact sheets, and the text of amendments offered during markup are all available at the following websites. I look forward to continuing the dialogue about the details of health reform, and correcting any myths as the debate moves forward.

-Speaker of the House <http://www.speaker.gov/newsroom/legislation?id=0327>

-House Committee Energy and Commerce <http://energycommerce.house.gov/>

-House Committee on Education and Labor
<http://edlabor.house.gov/markups/2009/07/hr-3200-americas-affordable-he.shtml>

-House Committee on Ways and Means
<http://waysandmeans.house.gov/MoreInfo.asp?section=52>

[America's Affordable Health Choices Act Information Packet](#)